



February 17, 2010

Inside this Issue:

Admiral's Call by the Surgeon General of the U.S. Navy Vice Admiral Adam M. Robinson, Jr.	2
Bremerton Team Aboard Bataan Supports Haiti Relief Effort	3
Navy Surgeon General Discusses Support Available to Wounded Warriors at Hiring, Support Conference	4
24th MEU Builds 400 Patient Medical Facility in Port-au-Prince	5
Compassion Satisfaction Buffers Burn Out in Haiti	6
USS Bataan Medical Team Delivers Earthquake Miracle	7
Haitians Find Comfort and Inspiration Aboard Hospital Ship	7
Navy Medicine Ombudsman Program Opens Hearts and Minds	8

Did You Know?

USNS Comfort medical personnel have completed 755 surgeries since Feb. 15, 2010 in support of Operation Unified Response.

Navy and Marine Corps Medical News

A Public Affairs Publication of the Bureau of Medicine and Surgery

Comfort Remains Beacon of Hope in Haiti

**By Mass Communication Specialist
2nd Class (AW) Chelsea Kennedy,
USNS Comfort (T-AH 20) Public Affairs**

USNS COMFORT (T-AH 20), At Anchor (NNS) -- After eight days in support of Operation Unified Response, the Military Sealift Command hospital ship USNS Comfort (T-AH 20) has made a significant impact in humanitarian aid and relief mission in Haiti.

Comfort departed Baltimore Jan. 16 following a presidential order to provide humanitarian aid to the Caribbean nation in response to the Jan. 12 earthquake which devastated the country.

In the short time Comfort has been on station, Sailors and civilians aboard the ship have provided much needed medical care to the Haitian people as part of a multinational effort.

"It was very encouraging to see people who came to us broken and really desperate leaving the ship smiling and chatting with each other," Destroyer Squadron 40 (DESRON 40) Operations Officer Lt. Cmdr. Anthony Mortimer. Destroyer Squadron 40 is embarked aboard Comfort.

There have been more than 372 medical evacuations to Comfort, and the hospital ship's medical professionals are also helping establish patient triage sites ashore.

"It's a hope and a chance for people who don't really have much right now," said Comfort Medical Operations Officer Lt. Cmdr. Jeffery Stancil. "[Our contributions] are absolutely being felt out there and

See COMFORT, Page 3



USNS COMFORT - U.S. Navy Lt. Alayana Schwartz, Hospitalman Keith Recabo and Cmdr. Shawn Safford operate on a one-year-old Haitian boy aboard the Military Sealift Command hospital ship USNS Comfort (T-AH 20) off the coast of Haiti Jan. 25, 2010. The boy sustained a knee laceration when concrete fell on his leg during the earthquake that struck the country Jan. 12, 2010. (U.S. Navy photo by Mass Communication Specialist 2nd Class Chelsea Kennedy/Released)

Report Documentation Page				Form Approved OMB No. 0704-0188	
Public reporting burden for the collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to a penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.					
1. REPORT DATE 17 FEB 2010		2. REPORT TYPE		3. DATES COVERED 00-00-2010 to 00-00-2010	
4. TITLE AND SUBTITLE Navy and Marine Corps Medical News. February 17, 2010				5a. CONTRACT NUMBER	
				5b. GRANT NUMBER	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S)				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Navy Bureau of Medicine and Surgery, 2300 E Street NW, Washington, DC, 20372-5300				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES					
14. ABSTRACT					
15. SUBJECT TERMS					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT Same as Report (SAR)	18. NUMBER OF PAGES 8	19a. NAME OF RESPONSIBLE PERSON
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified			

Admiral's Call by the Surgeon General of the U.S. Navy Vice Admiral Adam M. Robinson, Jr.

Navy Medicine's Mission in Haiti

On January 15, I stood on the deck of the USNS Comfort the night before she deployed to Haiti speaking to 550 of the most talented and professional medical team in the world. I talked about what they were about to see once they arrived in Haiti. My message was simple. You will see tragedy of unimaginable proportions and that our humanitarian mission there will be a life-defining assignment for them in many ways.

On the best days, Haiti is a poor country. It is, in fact, the poorest country in the Western Hemisphere, and it suffers from poverty, deforestation and political uncertainty. Of the 5 million to 6 million people who live in Haiti, roughly 2 million live in and around Port-au-Prince. Before the earthquake struck, Haiti had recently been hit by hurricanes and floods and the quake destroyed whatever infrastructure existed. The country's need is greater today by an order of magnitude and I expect us to be there providing care and helping get the country back on its feet for some time to come.

We now have more than 1000 members of Navy Medicine performing incredible work in support of Haitian relief. They are getting first-hand experience in a very intense and a very critical situation there. They are saving lives and making a difference in people's lives. This is the meaning of humanitarian assistance- protecting others even when it places us in harm's way, extending ourselves for the benefit of those in need.

The devastation in Haiti has been terrible and the COMFORT has been a shining beacon of hope since she arrived there on Jan 20. Our team on COMFORT and on USS Vinson, USS Bataan and the other medical departments providing support has seen devastation, injuries, and death beyond their imagination. They have performed

admirably in an intense and dynamic situation. I am proud of the professionals who came together on short notice to make the deployment happen. I am equally proud of the teams that had to work harder back here at our medical centers to ensure we maintained the same level of care to our patients despite surging so many of our medical teams almost overnight. Medicine is a common language that all people understand, and it is a way to bridge differences.

I emphasize that while the situation in Haiti is an extreme example of working in stressful conditions, we all face stress in our jobs whether it is at a MTF, as part of a deployed Marine unit or any of the important roles we fill around the world providing world class care

"There is no shame in raising your hand and taking a timeout. There is no shame in asking for help. As health care providers we must recognize that we are not immune to physical and mental fatigue. We are human"

for our military forces and their families. If you feel overwhelmed and feel the need to talk, please don't hesitate to do that. There is no shame in raising your hand and taking a timeout. There is no shame in asking for help. As health care providers we must recognize that we are not immune to physical and mental fatigue. We are human. As we strive to preserve the psychological health of service members and their families the stressors of our operation tempos missions



abroad and at home it is important for us to be mindful of this and watch for signs that someone may need some help.

We must remain mindful of the stress in our lives as we deploy world wide in support of our nation and as we care for the family's our warriors at home. We must care for them and we must care for each other.

The most important resource in the US military is not a ship, a tank or a plane: it is our people. The physical, mental, emotional, and spiritual health and fitness of each individual is critical to maintaining an effective fighting force. We have the ultimate responsibility in ensuring the medical readiness of our war fighters; to make sure that our medical forces are prepared, trained, and deployed with the right capabilities and the right support they need.

Medical leaders should use the stress continuum, combat and operational stress first-aid (COSFA) models, as assessment tools for their commands. The COSFA framework of the five C's – COVER, CALM, CONNECT, COMPETENCE, and CONFIDENCE – forms the basis for understanding core issues that impact individuals and the command as a whole. Military

See SURGEON GENERAL, Page 4

Bremerton Team Aboard Bataan Supports Haiti Relief Effort

By Douglas H. Stutz, Naval Hospital Bremerton Public Affairs

BREMERTON, Wash. (NNS) - Doctors, nurses and hospital corpsmen from Naval Hospital Bremerton (NHB) have been embarked on board multipurpose amphibious assault ship USS Bataan (LHD 5) since Jan. 17.

Bataan is currently off the coast of Haiti operating in support of Operation Unified Response.

"I only have great things to say about each and every staff member. In times of chaos and crises, they have responded with care, calm and confident professionalism," said Chief Hospital Corpsman Rena Shockey, regarding the NHB team made up of doctors, nurses and hospital corpsmen on board Bataan. "We have taken care of a full variety of injuries and illnesses, though some hit us a little harder than others."

The NHB team immediately found themselves responding to the medical needs of Haitian quake victims.

"All of us, as well as the Fleet Surgical Team already there and the ship's crew, pulled together and acted as a well rehearsed team to care for each and every patient," said Shockey. "I found this amazing as most of us had never met, let alone worked together."

Patients arrived on board Bataan via helicopter and air cushion landing craft.

"Both are effective platforms for

transporting patients and allow for greater triage and continuous care by the physicians, nurses and hospital corpsmen who are ashore," explained Shockey. "Once here on the ship, all move into action as a cohesive team to best treat the patients who have arrived. It is an amazing sight to see."

NHB staff members are also striving to do as much as they can to assist the relief effort ashore.

"We have had a number of staff ashore for Sailor Ashore Missions (SAM's) doing a variety of tasks to help the Haitians," said Shockey. "Some have been more of scouting missions. Others gone to the local clinic where we help coordinate the transport of appropriate patients and still others have been on working parties for leveling dangerous structures or moving rubble."

The days have been long for everyone, especially for those in need. The 7.0 magnitude earthquake caused severe damage and has leveled much of the island nation's infrastructure.

"I think we all agree that the most difficult parts of this assignment are sending the patients back after treating them to Haiti, especially the kids," said Shockey. "It is a bittersweet moment for all of us."

According to Shockey, the military response on board Bataan also includes a group of Marine Corps linguists who have been very helpful in the treatment of casualties. They have been effective in bridging communication and



USS BATAAN - Medical personnel from the amphibious assault ship USS Bataan (LHD 5) and the 22nd Marine Expeditionary Unit tend to an injured Haitian on board the ship while off the coast of Haiti, Jan. 20, 2010. The Bataan Amphibious Ready Group and the 22nd Marine Expeditionary Unit are providing humanitarian assistance and disaster relief to Haitians in the wake of a 7.0-magnitude earthquake that struck the country Jan. 12, 2010. (U.S. Marine Corps photo by Cpl. Bobbie A. Curtis/Released)

cultural differences between provider and patient.

"Cultural differences have been considered in treating each patient as part of the overall process and

See BREMERTON, Page 5

COMFORT

From Page 1

we are making a huge difference."

The Comfort surgical team has performed more than 260 procedures, ranging from resetting crushed limbs to amputations in an effort to save lives. The ship's medical professionals have also assisted in the birth of a baby girl.

"I am very proud of the work that we are doing," said Lt. Cmdr. Michael Ray, an oral/maxillofacial surgeon aboard Comfort. "There are so many very badly injured people that need surgery, and we are the

most equipped to handle those needs. We have 11 fully functioning operating rooms, a wide variety of surgical specialties available, and a large support staff."

Comfort is a state-of-the-art medical facility with a 1,000 bed capacity that is filling quickly.

"We just got here," said Comfort Ship's Master Robert Holley, who is responsible for the operation of the ship. "The job that we have done in this short period of time with everybody here coming together is very impressive."

To date, there have been 926 patients admitted on board and 798 patients discharged (as of Feb. 15).

As the mission progresses, Comfort is working to develop follow-up plans for patient care and treatment and providing aid to local civilian medical facilities.

Navy Surgeon General Discusses Support Available To Wounded Warriors at Hiring, Support Conference

By Cmdr. Cappy Surette, Bureau of Medicine and Surgery Public Affairs

ALEXANDRIA, Va. (NNS) -- Navy Surgeon General discussed support available to Wounded Warriors Feb. 2 at the first Wounded Warrior Hiring and Support Conference held in the National Capital Region.

Vice Adm. Adam Robinson, the surgeon general, spoke at the conference which was hosted by Navy Sea Systems Command at the Hilton Alexandria Mark Center.

The conference focused on federal employment opportunities for disabled veterans.

Speaking to an audience of approximately 400 people, Robinson emphasized the Navy's commitment to providing world class medical care for military personnel and their families.

"The Navy has a long history of taking care of its own and our commitment to our injured Sailors, Marines and their families do not end with their arrival at a medical unit or hospital. It continues through their entire road to recovery," said Robinson. "When our people who are in the fight are hurt, we apply all on our training and resources to provide rapid care in partnership with our sister services."

The goal of the conference was to improve the Department of the Navy's overall approach and effectiveness in hiring wounded

warriors. The conference presentations explored best practices and policies for helping injured veterans find employment, as well as exploring barriers to hiring them while also discussing ways to overcome them.

According to the Department of Veterans Affairs, several federal authorities apply to 30 percent or more disabled, yet unemployment is double the national average for Wounded Warriors. Career employment is the final step in re-integration into society.

"We work hard to find post military service employment opportunities and help employers understand that they need to recognize that there may be physical, as well as, cognitive limitations if an employee has moderate to severe TBI (traumatic brain injury)," said Robinson. "Generally people who sustain a concussion will recover with time but that limited work hours and other accommodations may be necessary."

Robinson emphasized that while employers may have to make some accommodations, their return on investment would be high.

"As long as you invest in them, they will do their jobs," said Robinson. "All around the world, our men and women in the military guarantee their work with their lives. They won't quit because that is who they are."

Robinson provided an overview

of significant health challenges associated with returning wounded warriors including standard and innovative treatments for TBI and post traumatic stress disorder (PTSD) and what the Navy is doing to assist them throughout their entire healing process and transition back into civilian life.

"We've been exploring all options to help treat PTSD," said Robinson. "One very successful program we've implemented at Naval Medical Center San Diego is a virtual reality simulator that adds a technological twist to a common PTSD treatment called prolonged-exposure therapy in which patients recall in graphic detail the traumatic events that set off their illness. For many sufferers, retelling and discussing the bad memories with a therapist can take away the sting."

Navy Surgeon General also shared his views on the long-term care that will be needed for many wounded veterans and emphasized the Navy's commitment to work with numerous partners to ensure they receive enduring care.

"Care doesn't stop when the war stops," said Robinson. "Care for our wounded warriors today will continue for the better part of this century, but we won't be able to do it alone. We have to blend a set of care across multiple federal and civilian agencies to provide the best care for those who have sacrificed so much for this great nation."

SURGEON GENERAL

From Page 2

leaders and their leadership teams should perform the five core functions of Combat and Operational Stress Control (COSC) - STRENGTHEN, IDENTIFY, MITIGATE, TREAT, and REINTEGRATE – that are essential for the prevention, identification, and care of our staff to prevent adverse stress outcomes across the combat

and operational stress continuum.

Our humanitarian assistance mission in Haiti will be a marathon and we must pace ourselves and watch out for one another. We must ensure that we have each others' backs and make sure we are there for one another when needed. This will be especially important when our teams have been deployed for months.

You are all working hard and doing great work. Be safe, be smart and take care of one another. It is my honor to represent you as your Surgeon General.

Got News? If you'd like to submit an article or have an idea for one, contact MEDNEWS at 202-762-3160, fax 202-762-1705 or Valerie.Kremer@med.navy.mil.

24th MEU Builds 400 Patient Medical Facility in Port-au-Prince

By Lance Cpl. David Beall, 24th MEU

PORT-AU-PRINCE, Haiti — Marines and Sailors with Combat Logistics Battalion 24 arrived at an empty soccer field Jan. 31 with a mission — transform this recreation area into an interim medical after-care facility capable of treating up to 250 patients.

Within 48 hours the Marines and their Navy counterparts completed setting up a small tent city of large, green military tents neatly aligned across a field owned by car dealership owner Daniel Wozier. By Saturday there were 43 tents, capable of holding 400 patients and far exceeding the initial requirement, erected and the first three patients arrived from USNS Comfort.

The facility was set up on land loaned to the U.S. Government for free by local national Daniel Wozier, owner of the General Motors and Honda dealership across from the site that includes a helicopter landing zone and 400 bed spaces, giving patients presently on USNS Comfort a place to rehabilitate before going home.

"Our sole purpose here was to build a viable system so that the USNS Comfort is able to discharge stable patients and bring them here so in turn they will be able to take on more critical patients," said Maj. Keith E. Owens, executive officer, CLB-24, 24th Marine Expeditionary Unit.

Approximately 100 Marines and Sailors with CLB-24, with help from U.S. Army soldiers of 3rd Expeditionary Sustainment Command who transported tents, food and water to the site, worked together in setting up this facility. Once completed and ready for patients, medical staffers from USNS Comfort, USS Bataan, USS Ashland, USS Normandy, USS Ft. McHenry and Desron 14 arrived and set up medical treatment equipment inside the tents.

"This is truly a joint effort, we've got the Navy medical staff caring for the patients, Army convoys bringing in supplies and Marines providing logistical support as well as security," said Owens, a Jackson, Mich. native.

These patients received their initial care aboard USNS Comfort but that is not enough. Before returning home they must be completely rehabilitated and this facility provides them the space and care they need to get back to their lives.



PORT-AU-PRINCE, Haiti - Marines and Sailors of Combat Logistics Battalion 24, 24th Marine Expeditionary Unit, off-load three Haitian patients from a MH-60, Feb. 5. The patients were transported from the USNS Comfort and received immediate medical care upon arrival at the interim aftercare facility in Port au Prince, Haiti. CLB-24 set up and currently maintain a medical facility for Haitians returning from USNS Comfort to their homes in Haiti. (U.S. Marine Corps photo by Lance Cpl. David J. Beall)

"A lot of these people need after care not just initial care, this facility will send them back to their homes fully rehabilitated and ready to get back into their daily routines," said, Petty Officer 2nd Class Nick R. Richards, hospital corpsman, USNS Comfort.

24th MEU Marines and Sailors transferred all their responsibility for security of the area Feb. 8 and brought all their troops and equipment back to USS Mesa Verde and USS Nassau and departed Haiti for future missions in the Central Command area of operations.

"I have every confidence that they will continue to do a good job maintaining this facility and the people of Haiti will receive the best care available," said Owens.

Initially this facility will ease the strain on the USNS Comfort and other naval vessels that are at capacity for medical patients. Rotating those no longer in need of critical care on U.S. ships to an interim facility makes space for those still in need. The goal is for sites like this to replace ships and allow Haitian locals to return home.

BREMERTON

From page 3

haven't been an issue," noted Shockey, citing the culinary needs of each recovering patient as a prime example.

Shockey also attests that good, old American ingenuity has also played a part in the NHB team's support of Operation Unified Response.

"Improvisation and flexibility have allowed us not

just to care for more patients but to improve the quality of care given to each patient as well," she said. "As time progresses everyone is maturing and growing to fulfill a need with limited resources. Our hospital corpsmen are finding out and amazing themselves at what they can do. They are seeing their boundaries extended and are making timely decisions often reserved for nurses and doctors. I would love to name one or two who have stepped out above the others as top performers, but I cannot, as all are answering the call with courage and dedication they did not know existed."

Compassion Satisfaction Buffers Burn Out in Haiti

By Valerie A. Kremer, Bureau of Medicine and Surgery Public Affairs

Immediately upon arrival off Haiti, the medical team onboard USNS Comfort began around the clock surgical procedures and a host of other medical care for the victims of the Jan 12 earthquake that killed more than 230,000 people. While the crew settled in for sustained operations caring for the people of Haiti, ship leadership worked to ensure that operational stress controls were put into place to take care of the medical team who would see much tragedy while providing needed medical services to Haitians affected by the earthquake.

"People getting burned out is the greatest issue," said Capt. Paul S. Hammer, MC, director, Naval Center for Combat and Operational Stress Control.

Possessing the most robust medical capabilities in the region, the Comfort's medical personnel and crew saw the most challenging cases from the 7.0 magnitude earthquake that devastated the Haitian capital, Port-au-Prince, Jan. 12 but Hammer suggests that the stress involved in disaster relief operations is different than what

military personnel would experience in combat operations.

"A humanitarian assistance mission will not have quite the post traumatic stress disorder (PTSD) mark, unless maybe the person has family there," Hammer said. "A humanitarian assistance mission is very rewarding, constructive, and a great thing to do."

Hammer was quick to emphasize that while humanitarian assistance missions have great rewards, leadership must be attuned to mitigate the stress that can manifest itself. Being separated from family, emotional stress, physical stress, and the day to day stress of an overwhelming mission make up operational stress when on any deployment.

"Compassion satisfaction buffers compassion fatigue and burn out," said Capt. Richard Westphal, NC, Mental Health Wellness Programs Coordinator, Deployment Health, Bureau of Medicine and Surgery. "They know they are helping people, they can see it on their faces. It is helping them as well."

To avoid burn out, the staff and crew are working hard to take care of one another while ensuring mission completion.

Navy Surgeon General Vice

Adm. Adam M. Robinson spoke to the crew of the Comfort the night before the ship deployed, Jan. 15 and advised them on some of the stresses they may experience.

"Operational and humanitarian missions - like Haiti - have many identifiable stressors ranging from daily hassles to extreme trauma," said Robinson. "If you feel overwhelmed and feel the need to talk, please don't hesitate to do that. There is no shame in raising your hand and taking a timeout. There is no shame in asking for help."

According to Hammer, leadership and leadership teams should perform the five core functions of Combat and Operational Stress Control (COSC) - strengthen, identify, mitigate, treat, and reintegrate.

"These are essential for the prevention, identification, and care of staff to prevent adverse stress outcomes across the combat and operational stress continuum," said Hammer. "Sleep, hydration, rotating shifts, and nutrition, are also important in mitigating operational stress."

For more information on the Naval Center for Combat and Operational Stress Control, visit: <http://www.nccosc.navy.mil>.

PORT-AU-PRINCE, Haiti—Hospitalman Christopher R. Brossard, assigned to the Military Sealift Command hospital ship USNS Comfort (T-AH 20), prepares to give a patient aboard Comfort a shot to prevent blood clotting, Feb. 3, 2010. Brossard, who was born in New York, spent 17 years in Haiti where he learned to speak Creole before joining the Navy. In addition to providing medical care for patients aboard Comfort, Brossard is also working as a translator between care providers and patients. Brossard is deployed aboard Comfort supporting Operation Unified Response, a multinational effort to provide medical care and humanitarian aid to the people of Haiti in the aftermath of a 7.0 magnitude earthquake that struck Haiti Jan. 12. (U.S. Navy photo by Mass Communication Specialist 2nd Class Shannon Warner/Released)



USS Bataan Medical Team Delivers Earthquake Miracle

By USS Bataan Public Affairs

USS BATAAN, At Sea (NNS) -- Medical professionals aboard multipurpose amphibious assault ship USS Bataan (LHD 5) successfully delivered 8 lb. 3 oz. Theo Joe, a baby boy, at approximately 4:40 p.m., Jan. 30 in the ship's hospital, following a medial evacuation to Bataan from Grand Goave, Haiti.

A team of doctors and corpsmen from Bataan were volunteering at the Lifeline Christian Ministries Mission Medical Clinic, in Grand Goave, when they identified a pregnant Haitian woman, who had been laboring for nearly four hours and needed urgent care exceeding the clinic's capabilities.

Bataan's team in Grand Goave ordered an evacuation of the patient to the ship by way of an air cushion landing craft (LCAC) from Assault Craft Unit (ACU) 4.

"Mom and her baby boy are doing great," said Cmdr. Michael Cackovic, the delivering doctor, who is embarked aboard Bataan from Naval Medical Center, San Diego. "The LCAC ride relaxed her enough to be able to give birth naturally and safely."

Cackovic said the mother and baby are currently listed in stable condition and recovering aboard Bataan.

Bataan is part of the Amphibious Relief Mission, along with USS Carter Hall (LSD 50), USS Fort McHenry (LSD 43) and USS Gunston Hall (LSD 44), in support of Operation Unified Response in Haiti after a 7.0 magnitude earthquake devastated the island nation Jan. 12.



BAIE DE GRAND GOAVE, Haiti - Medical personnel aboard the multi-purpose amphibious assault ship USS Bataan (LHD 5) hold a newborn baby boy under a heat lamp after the child's birth in the ship's operating room Jan. 30, 2010. The baby boy was the first baby ever born aboard Bataan. Bataan is supporting Operation Unified Response following a 7.0 magnitude earthquake that caused severe damage in Haiti on Jan. 12. (U.S. Navy photo by Mass Communication Specialist 2nd Class Kristopher Wilson/Released)

Haitians Find Comfort and Inspiration Aboard Hospital Ship

By Mass Communication Specialist
2nd Class Shannon Warner, USNS
Comfort Public Affairs

USNS COMFORT, At Anchor -- The crew of the Military Sealift Command hospital ship USNS Comfort (T-AH 20) gathered Feb. 12 on the vessel's mess deck for a service of remembrance and hope honoring Haitians and relief workers affected by the 7.0 magnitude earthquake which devastated Haiti one month ago.

Comfort is currently involved in humanitarian aid and disaster relief in support of Operation Unified Response, a joint venture established to provide assistance to Haitians after the Jan. 12 earthquake in the Caribbean nation.

What started as a solemn service to remember the estimated 200,000 individuals who lost their lives and 300,000 injured in the earthquake turned to inspirational

singing led by Haitian patients and their escorts.

"It really motivated and inspired me," said Hospital Corpsman 3rd Class Rasheda Anderson, a surgical technician in the operating room aboard Comfort. "It really gave me hope and made me believe in the mission even more. It really touched me inside and seemed to bring up everyone's morale and spirits."

Comfort chaplains, several Red Cross workers and patients felt a service conveying a feeling of hope would be beneficial to everyone aboard the hospital ship.

"This service was important for everyone who has been through so much," said Comfort Command Chaplain David Oravec.

The memorial was attended by service members, civilian volunteers and Haitian patients who were well enough to

attend with their escorts.

The service included prayers and singing as well as a public reading by Lt. Yonnette Thomas of a letter of appreciation from a former Comfort patient.

"I know if you weren't here, many of us would be dead," Thomas read from the letter from former patient Leveille Valmir. "This is the biggest proof of love the U.S. could offer the Haitian people. You have given us life."

Prayers were lead by Comfort chaplains and Red Cross volunteer Rev. Noster Montas. Singing was led by The Joyful Noise Choir and Red Cross translator Simpson St. Fort.

"It was really inspirational. I felt my eyes get watery," Anderson said.

The ceremony concluded with a benediction led by Comfort Chaplain John Franklin.

Would you like to share your deployment story with MEDNEWS? Contact Lt. Holly Lee at 202-762-3773 or holly.lee@med.navy.mil.

NATIONAL HARBOR, Md. - Navy Vice Adm. Adam M. Robinson, Jr., M.D., surgeon general of the Navy, speaks to more than three-thousand military and civilian medical educators, researchers, health care providers and partners from industry and allied agencies who are part of the Military Health System (MHS) during a plenary medical education session Jan. 25, 2010. The four-day MHS conference was held in National Harbor, Md. to share knowledge, network and improve best practices. (U.S. Navy photo by Joseph P. Cirone/Released)



Navy Medicine Ombudsman Program Opens Hearts and Minds

By Lt. Holly Lee, MSC, Bureau of Medicine and Surgery

The amount of care packages many deployers receive during the holiday season is amazing, just ask the post office! However, when my Shipmates and I arrived in Afghanistan in March there were little remnants of holiday packages left and my husband and family worked diligently to get "nice-to-have" packages over to me on a regular basis.

Unfortunately, there are many of us out there that aren't so lucky.



(Photo by Lt. Jessica Woody, MSC/Released)

We have single Sailors that don't want to burden mom and dad. We have Sailors with spouses at home caring for three kids and working full time. For these families and many others getting to the store and post office on any sort of regular basis can be an overwhelming task.

I was able to share many packages with my fellow deployers, that weren't as fortunate, because of the care packages I received from my Navy Medicine family.

These packages also supported our mission because often times there were small items that my team and I could carry out on convoys and give to small children. When we give a piece of gum, a small stuff animal or a matchbox car to a child we are building future relationships and achieving our "Hearts and Minds" mission.

On 01 Feb 2010 BUMED's OMBUDSMAN began a year-round care package collection program so our deployers can know that their Navy Medicine family is thinking of them and supporting them, not only during the holidays but every day.

This program is not limited to BUMED deployers. If you have a Shipmate that is part of the Navy Medicine family and deployed please submit their name and contact information and they will be added to the care package recipient's list.

For more information please contact LT Holly Lee:
holly.lee@med.navy.mil:
 202-762-3773

Navy and Marine Corps Medical News

Navy Bureau of Medicine and Surgery

Vice Adm. Adam M. Robinson, Jr.
Surgeon General

Cmdr. Cappy Surette
Public Affairs Officer

Valerie A. Kremer
MEDNEWS Managing Editor

Bureau of Medicine and Surgery
2300 E Street NW
Washington, DC 20372-5300

Public Affairs Office
Phone: 202-762-3160
Fax: 202-762-1705

To keep up with Navy Medicine news and daily updates follow us on...

facebook

twitter